

**SUMMARY REPORT DIGEST**  
CHICAGO POLICE DEPARTMENT

COMPLAINT LOG NO.  
1020263

TYPE  
INFO

DATE OF REPORT (Day-Mo-Yr.)  
5 Nov 08

INSTRUCTIONS: To be used in all cases that are to be classified as either EXONERATED, UNFOUNDED, NOT SUSTAINED, or in SUSTAINED cases where the Disciplinary Recommendation does not exceed FIVE (5) DAYS SUSPENSION. SUBMIT ORIGINAL AND 3 COPIES IF ASSIGNED TO SAME UNIT AS ACCUSED. SUBMIT ORIGINAL AND 4 COPIES IF NOT ASSIGNED TO SAME UNIT AS ACCUSED.

TO:  CHIEF ADMINISTRATOR,  
INDEPENDENT POLICE REVIEW AUTHORITY

CHIEF,  
INTERNAL AFFAIRS DIVISION

FROM -INVESTIGATOR'S NAME Linda SALUSTRO	RANK P.A.	STAR NO. 3944	EMPLOYEE NO. [REDACTED]	UNIT ASSIGN. 121	UNIT DETAILED
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REFERENCE NOS. (LIST ALL RELATED C.L., C. B., I.R., INVENTORY NOS., ETC., PERTINENT TO THIS INVESTIGATION)

RD # [REDACTED]

ADDRESS OF INCIDENT 727 E 111th St. Chicago, (5th District)	DATE OF INCIDENT -TIME 03 Sep 06, 23:05	BEAT OF INCIDENT 531
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ACCUSED	NAME 1. Brian FORBERG	RANK Det	STAR NO. 21249	EMPLOYEE NO. [REDACTED]	UNIT ASSIGN. 620	UNIT DETAILED
	2. Kevin EBERLE	Det	20817	[REDACTED]	620	
	3.					
	SEX/RACE 1. M/W	D.O.B. 1960	DATE OF APPOINTMENT 10 Jul 1995	DUTY STATUS (TIME OF INCIDENT) <input checked="" type="checkbox"/> ON DUTY <input type="checkbox"/> OFF DUTY	<input checked="" type="checkbox"/> SWORN <input type="checkbox"/> CIVILIAN	
2. M/W	1968	22 Nov 1993	<input checked="" type="checkbox"/> ON DUTY <input type="checkbox"/> OFF DUTY	<input checked="" type="checkbox"/> SWORN <input type="checkbox"/> CIVILIAN		
3.			<input type="checkbox"/> ON DUTY <input type="checkbox"/> OFF DUTY	<input type="checkbox"/> SWORN <input type="checkbox"/> CIVILIAN		

IF APPLIES, DATE ARRESTED/INDICTED 1.	CHARGES	COURT BRANCH	DISPOSITION & DATE
2.			
3.			

COMPLAINANT	NAME	ADDRESS**	CITY	STATE	TELEPHONE	SEX/RACE	D.O.B./AGE
	[REDACTED]	[REDACTED]	Chicago IL 60615	[REDACTED]	[REDACTED]	M/Unk	Unk

VICTIMS	NAME	ADDRESS**	CITY	STATE	TELEPHONE	SEX/RACE	D.O.B./AGE
	[REDACTED]						

WITNESSES	NAME	ADDRESS**	CITY	STATE	TELEPHONE	SEX/RACE	D.O.B./AGE
	[REDACTED]	[REDACTED]	Chicago IL 60649	[REDACTED]	unk	M/B	[REDACTED] 990
		[REDACTED]	[REDACTED]	[REDACTED]	unk	F/B	[REDACTED] 34

SEE ATTACHED SHEET FOR ADDITIONAL ACCUSED, COMPLAINANTS, VICTIMS, WITNESSES.

\*\*IF CPD MEMBER, LIST RANK, STAR, EMPLOYEE NOS. IN ADDRESS, PAX/BELL IN TELEPHONE BOX.

NOTE: Complaint "Type" remains classified as INFO - Sworn Affidavit is Not on file.

ALLEGATIONS	The complainant [REDACTED] alleges that on the above date, time and location the named accused detained [REDACTED] without legal justification.
	[REDACTED]

Briefly summarize the investigation describing your efforts to prove or disprove the allegation(s); indicate whether witnesses or evidence support or do not support the allegation(s).  
In sustained cases ONLY, copies of the accused member's Summary of Previous Disciplinary Actions and Record of Previous Complimentary History will be included as attachments.

Civil Suit [REDACTED]

Upon receipt for investigation the undersigned called the complainant [REDACTED] and left a message requesting a return call. A Certified Letter, Article No. [REDACTED] was sent and received at the address supplied by the complainant. As of this date the complainant has not been interviewed and a Sworn Affidavit is not on file, therefore it is recommended this case be closed no conversion.

SUMMARY

ATTACHMENTS	INVESTIGATIVE REPORTS-SUPPORTING ALLEGATION LIST ATTACHMENT NUMBERS:	INVESTIGATIVE REPORTS-SUPPORTING ACCUSED MEMBER(S) LIST ATTACHMENT NUMBERS:	PHYSICAL EVIDENCE LIST ATTACHMENT NUMBERS:	TOTAL NUMBER OF ATTACHMENTS SUBMITTED WITH THIS FILE:
				6
FINDINGS - RECOMMENDATIONS	Summarize the findings and recommendations. Rule violations will be cited by number only. One overall recommendation for Disciplinary Action will be made by the investigator. The recommendation will be for ALL sustained findings; recommendations will NOT be made for each sustained allegation. Example: 1. Violation noted, no disciplinary action warranted. 2. That the accused member be reprimanded 3. That the accused member be suspended for --- days (not to exceed 5 days).			

DATE INITIATED (Date complaint was received for investigation)	DATE COMPLETED (Date of this report)	ELAPSED TIME (Total time expressed in days)
25 Sep 08	05 Nov 08	41 Days

Investigator will initiate the Command Channel Review form by completing the Investigator's Section

INVESTIGATOR'S SIGNATURE

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IF NECESSARY, USE AN 8 1/2 x 11" SHEET OF WHITE PAPER TO CONTINUE ANY ITEM.

Internal Affairs Division  
General Investigation Section

05 Nov 08  
CL # 1020263

**Attachments**

No.	Type	No. of Pages
1	FACE SHEET	1
2	CONFLICT CERTIFICATION	
3	SWORN AFFIDAVIT FROM COMPLAINANT	1 Non Cooperation
4	REPORT (OTHER)	2 Certified Letter & Receipt
5	REPORT (OTHER)	20 Civil Suit [REDACTED]
6	ARREST REPORT	8 [REDACTED]